

Approved per Sanggunian Resolution No.: \_\_

Certified Correct: \_\_

## Republic of the Philippines

				SE ORDER	DATE:		
upplier _						P.O. No.: BY: 24 - 02 : D0004	
	locos Norte			Date: Fol	omory 3, 2021		
Gentlem							
Pleas of			fice the following articles subject t				
	Place of Delivery: P. L. S. 0.  Solon days after receipt a			Delivery Term	The second secon		
em No.	Unit Unit	Quantity		The same of the sa			
1	kit	390	Newborn Screening Kit (Expande		Unit Cost 1,750.00	Amount	
			TROVING E	ZHERRY CLYICE	Charles and the second	682,500.00	
otal Amo	unt in Word	la.	Six Hundred Eighty Two Thousand Five H	undered Deseas		500 F00 0	
		1011	te the full delivery within the time sp		one-tenth (1/10) of or	682,500.00	
percent fo	r every day o	f delay sha	ll be imposed.	15			
			À	Very truly your	44		
				-			
Conforme		(	**		F. ALBANO III		
		(Signatu	rial Hospital and Medical Center	Provinci	P		
		1	10.21		1		
			(Date)				
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Date: \_